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## BIB DATA SHEET

CONFIRMATION NO. 4200

<b>SERIAL NUMBER</b> 10/552,094	<b>FILING or 371(c) DATE</b> 10/04/2005 <b>RULE</b>	<b>CLASS</b> 623	<b>GROUP ART UNIT</b> 3733	<b>ATTORNEY DOCKET NO.</b> ZP193-05002
<b>APPLICANTS</b> Richard R. Navarro, Strongsville, OH; Bharadwaj Ananthan, Akron, OH; Randall R. Theken, Coventry Township, OH;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/US04/10000 04/02/2004 which claims benefit of 60/460,613 04/04/2003				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b>				
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /JULIANNA NANCY HARVEY/ Acknowledged Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> OH	<b>SHEETS DRAWINGS</b> 29	<b>TOTAL CLAIMS</b> 110
<b>INDEPENDENT CLAIMS</b> 5				
<b>ADDRESS</b> MIDDLETON & REUTLINGER 2500 BROWN & WILLIAMSON TOWER LOUISVILLE, KY 40202				
<b>TITLE</b> ARTIFICIAL DISC PROSTHESIS				
<b>FILING FEE RECEIVED</b> 3550	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	